2016-04-19-03-00067714

FEC FORM 3X

Office

Use

Only

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

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2016 APR 19 AM 9: 40

FEC FORM 3X

Rev. 12/2004

				CO IGHIER O	se Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If to over the line		12FE4M5	
Leadership	America	1-NC			
				1 1 1 1 1	
ADDRESS (number and street)	216 Bi	verusew?	DV:		
Check if different than previously reported. (ACC)	Natchez	<u></u>	<u> </u>	<u> </u>	. 56 - []
2. FEC IDENTIFICATION	NUMBER ▼	CITY A	ST	ATE A	ZIP CODE ▲
0.05630	18.P.C	3. IS THIS REPORT	NEW (N) OR	AMENDED (A)	
4. TYPE OF REPORT (Choose One)	(b) Monthly Report	Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Due On:	Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
And 45		Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	(FC)
April 15 Quarterly Report	(Q1) (c) 12-Day	Primary	(12P)	General (12G)	Runoff (12R)
July 15 Quarterly Report	(Q2) PRE-Elec		on (12C)	Special (12S)	D_2
October 15 Quarterly Report	· · · · · ·	<u></u>			
January 31 Year-End Report	(YE)	Election on	/ [· · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	in the State of
July 31 Mid-Year Report (Non-elec Year Only) (MY)		ž	(30G)	Runoff (30R)	Special (30S)
Termination Repo		Election on		*****	in the State of
5. Covering Period		() (through	gn ()3	3.11 20	افاً إ
I certify that I have examined		1	nd belief it is true,	, correct and comple	ete.
Type or Print Name of Trease	arer Sieve U	erswycett			
Signature of Treasurer	Store Very	upest	Dat	te MTM / D	Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

2016 · 04 · 19 · 0% · 00067715

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write	or	Type	Committee	Name
*****	01	1 y p c	Committee	Hami

Leadersmi	America-	- MC

Report Covering the Period:

From:

011 011 30.16

<u>03</u> 31 301

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2016		000
	(b) Cash on Hand at Beginning of Reporting Period		
	(c) Total Receipts (from Line 19)	00.0	
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	66.G	0.00
7.	Total Disbursements (from Line 31)	0.00	
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	0.00	000
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<u>ov</u> ol	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	000	

For further information contact:

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

FEC Form 3X (Rev. 02/2003)

DETAILED SUMMARY PAGE

of Receipts

Page 3

Write or Type Committee Name

America PAC- NC d: From: Oli Oli Doli G

Report Covering the Period:

2016-04-19-03-00067716

To:

03 31 2014

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
11. Contributions (other than loans) From: (a) Individuals/Persons Other				
Than Political Committees (i) Itemized (use Schedule A)	OOO	0.00		
(ii) Unitemized(iii) TOTAL (add	0.00	660		
Lines 11(a)(i) and (ii)▶	000	<u> </u>		
(b) Political Party Committees	0.00	<u> </u>		
(such as PACs)(d) Total Contributions (add Lines	000	000		
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) 12. Transfers From Affiliated/Other	ODO			
Party Committees	000			
13. All Loans Received	0.00			
14. Loan Repayments Received15. Offsets To Operating Expenditures	00.0	0.00		
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)		L		
to Federal Candidates and Other Political Committees	ODO	000		
17. Other Federal Receipts (Dividends, Interest, etc.)	000	0.00		
 Transfers from Non-Federal and Levin Fund (a) Non-Federal Account (from Schedule H3) 	500	0.00		
(b) Levin Funds (from Schedule H5)	0.00	J		
(c) Total Transfers (add 18(a) and 18(b))				
19. Total Receipts (add Lines 11(d),				
12, 13, 14, 15, 16, 17, and 18(c))▶	0.00	0.00		
20. Total Federal Receipts (subtract Line 18(c) from Line 19)▶	000	066		

from Line 31).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4 **COLUMN A** COLUMN B II. Disbursements **Total This Period** Calendar Year-to-Date 21. Operating Expenditures: Allocated Federal/Non-Federal Activity (from Schedule H4) Federal Share (ii) Non-Federal Share..... (b) Other Federal Operating Expenditures (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶ 22. Transfers to Affiliated/Other Party Committees..... Contributions to Federal Candidates/Committees and Other Political Committees..... 24. Independent Expenditures (use Schedule F)..... 26. Loan Repayments Made..... 27. Loans Made..... Refunds of Contributions To: Individuals/Persons Other Than Political Committees (b) Political Party Committees (c) Other Political Committees (such as PACs)..... (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..........▶ 29. Other Disbursements 30. Federal Election Activity (52 U.S.C. § 30101(20)) (a) Allocated Federal Election Activity (from Schedule H6) (i) Federal Share (ii) "Levin" Share..... (b) Federal Election Activity Paid Entirely With Federal Funds (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....▶ 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)

DETAILED SUMMARY PAGE

of Disbursements

Page 5 FEC Form 3X (Rev. 02/2003) COLUMN A COLUMN B III. Net Contributions/ **Total This Period** Calendar Year-to-Date **Operating Expenditures** 33. Total Contributions (other than loans) (from Line 11(d), page 3) 34. Total Contribution Refunds (from Line 28(d))..... 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures (from Line 15, page 3)..... 38. Net Operating Expenditures

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SCHEDULE A (FEC Form 3X)

TOTAL This Period (last page this line number only).....

FOR LINE NUMBER PAGE Use separate schedule(s)

	O	Citat		IVIDE	•		-		<u> </u>	
(che	ck only	or	ie)						
		11a		11b		11c		12		
		13		14		15		16		17

OF

ITEMIZED RECEIPTS for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) merica PAE NC Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Occupation Memo Item Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) В. Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Occupation Memo Item Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) \ Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Occupation Memo Item Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) SUBTOTAL of Receipts This Page (optional).....

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SCHEDULE B (FEC FORM 3X)	Use separate schedule(s)	FOR LINE NUMBER:			PAGE	OF
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22	23 24 28b 28		26 30b
Any information copied from such Reports and Stater or for commercial purposes, other than using the name						
NAME OF COMMITTEE (In Full) Leadership Amers	TA PAC- NC					
Full Name (Last, First, Middle Initial) A.	•		Date of Dis	bursement	~~~	
Mailing Address						ال
City	State Zip Code					
Purpose of Disbursement			Amount of I	Each Disburs	sement this	Period
Candidate Name		Category/ Type		Silventina de 188		
Office Sought: House Disburser Senate President	ment For: Primary General Other (specify) ▼		Memo	Item		
State: District: Full Name (Last, First, Middle Initial)					<u> </u>	
B			Date of Dis	bursement	γ γ γ γ γ	~ ~7
Mailing Address				الصدي		لح
City	State Zip Code					
Purpose of Disbursement Candidate Name		Category/ Type		Each Disburs		
Office Sought: House Disburser Senate President	nent For: Primary General Other (specify)	1,700	Memo			·
State: District: Full Name (Last, First, Middle Initial)			<u> </u>			
Mailing Address			Date of Dis		~~~~~	~~
		5				
City Purpose of Disbursement	State Zip Code					
	Amount of I	Each Disburs	sement this	Period		
Candidate Name		(19	;			
Office Sought: House Disburser Senate President	nent For: Primary General Other (specify) ▼		Memo	Item		
State: District:			7	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·
SUBTOTAL of Disbursements This Page (optional)		<u> </u>) Amerikan (ingli) Yang ing menjangkan	0	00
TOTAL This Period (last page this line number only))	>			اکسید	00

SCHEDULE C (FEC Form 3X) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE OF

		Detailed Summary Page	FOR LINE 13 OF FORM 3X
NAME OF COMMITTEE (In Full)	ca PAC-N	e	
LOAN SOURCE Full Name (Last, First,			ection: Primary General
Mailing Address			Other (specify) ▼
City	State ZIP Co	de	
Original Amount of Loan	Cumulative Payment To		Outstanding at Close of This Period
Date Incurred		Interest Rate	Secured: % (apr) Yes No
List All Endorsers or Guarantors (if any	to Loan Source	, <u> </u>	
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	X X 200 X 200 X
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · · · · · · · · · · · ·
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	
SUBTOTALS This Period This Page (optionation) TOTALS This Period (last page in this line of			0.00 0.00
Carry outstanding balance only to LINE 3,	Schedule D, for this line. If	no Schedule D, carry forward	I to appropriate line of Summary.







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Dashington, De 20463 999 E Street, NW

Ster D.

(3/2015)

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt Hand Delivered Date of Receipt Postmarked **USPS First Class Mail** 04-19-2016 Postmarked (R/C) USPS Registered/Certified Postmarked **USPS** Priority Mail Postmarked **USPS Priority Mail Express** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery** Date of Receipt Received from House Records & Registration Office. Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): 04-19-2016

DATE PREPARED